IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

BR201821

MAY 22, 2018

IHCP issues guidance for billing and rebilling inpatient rehabilitation encounters

The Indiana Health Coverage Programs (IHCP) has become aware of an error in 3M's All-Patient Refined Diagnosis-Related Group (APR-DRG) v30 inpatient grouper that caused claims for inpatient rehabilitation encounters to pay incorrectly. The affected claims are those that grouped to APR-DRG 862 – *Other Aftercare & Convales*cence.

As a result, the IHCP is issuing alternate billing instructions that allow inpatient rehabilitation claims to reimburse correctly. These alternative billing instructions are a temporary measure until the 3M issue is resolved and should be followed for inpatient rehabilitation stays with discharge dates through December 31, 2018. Providers are expected to resume normal billing and coding guidance for dates of discharge on or after January 1, 2019.

The 3M APR-DRG v30 inpatient grouper error retroactively affected claims for inpatient rehabilitation stays with dates of discharge on or after **October 1, 2015**. Therefore, the IHCP will allow providers to rebill previously submitted affected claims for adjudication.

The alternate billing instructions and the rebilling allowance apply to inpatient rehabilitation claims for members in all IHCP programs, including Healthy Indiana Plan (HIP), Hoosier Care Connect, and Hoosier Healthwise. When billing or rebilling for inpatient rehabilitation encounters, providers should follow the alternate instructions below regarding diagnosis and ICD-10-PCS coding to ensure proper grouping of the claim.

- ICD-10 Diagnosis Z51.89 Encounter for other specified aftercare should be coded as the primary diagnosis.
- An appropriate diagnosis code, according to clinical documentation, should be coded as a second diagnosis.
- Additional diagnosis codes may be appended to the claim, as appropriate.

MORE IN THIS ISSUE

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All appropriate ICD-10-PCS codes for procedures performed within the inpatient stay should be indicated on the claim. Report one ICD-10-PCS code for each distinct therapy assessment and treatment modality, per encounter.

Claims previously submitted for reimbursement through the fee-forservice (FFS) delivery system must be voided and replaced with the new claim. Both void and replacement transactions must be submitted using paper forms mailed to the following address:

DXC – Institutional Claims P.O. Box 7271 Indianapolis, IN 46207-7271 FFS claims beyond the original one-year filing limit must include a copy of this banner page as an attachment and must be filed within one year of the publication date.

Claims previously submitted for reimbursement through a managed care entity (MCE) for HIP, Hoosier Care Connect, and Hoosier Healthwise members must be rebilled to the appropriate MCE. Please contact the member's MCE for rebilling instructions.

IHCP to include level of need information for the MRO benefit on the Portal

The Indiana Health Coverage Programs (IHCP) will enhance the Provider Healthcare Portal (Portal) to display the level of need (LON) information for members covered for Medicaid Rehabilitation Option (MRO) services. This enhancement will be visible in the Portal as of May 31, 2018.

The LON information will be included on the eligibility benefit and coverage detail pages of the Portal. Adding the MRO LON to the benefit details allows providers to determine the member's LON without having to reference the <u>Medicaid Rehabilitation Option Services</u> provider reference module.

All providers will be able to see the MRO LON on the *Benefit Details* panel when verifying member eligibility – see Figure 1. Providers with the MRO specialty will also see detailed information for a member's MRO LON on the *Detail Information* panel – see Figure 2.

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Coverage	Description	Effective Date	End Date			
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Medicaid Rehabilitation Option	Medicaid Rehabilitation Option for Adults with Level of Need = 4, Service 01/01/2017 01/31/2017					
Medical Review Team	Medical Review Team procedure codes only	01/01/2017	01/31/2017			

Figure 1 – MRO coverage description and LON on the Benefit Details panel

Figure 2 – Member	LON detailed information on	he Detail Information	sanel
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IHCP Portal to allow rendering provider linkages to multiple group service locations in a single transaction

In response to feedback from providers, the Indiana Health Coverage Programs (IHCP) will enhance the IHCP Provider Healthcare Portal (Portal) to allow IHCP-enrolled group providers to link IHCP-enrolled rendering providers to multiple service locations in a single maintenance transaction. This enhancement will be visible in the Portal as of May 31, 2018. The following parameters apply:

- The user submitting the transaction must be an authorized delegate for Provider Maintenance tasks on the Portal accounts for each of the affected group service locations included in the transaction.
- All rendering linkages in a single transaction must be to group service locations operating under a single group taxpayer identification number (Tax ID).
- The effective date of the rendering linkage must be the same for each linkage included in a single transaction.

Groups will access this new function under the **Provider Maintenance** section of the Portal. To add rendering provider linkages to multiple group service locations in a single transaction, follow these steps:

- 1. Log in to the Portal account for the first group service location to which a rendering provider will be linked.
- 2. On the Portal My Home page, select Provider Maintenance; the Instructions page will appear.
- 3. On the Instructions page, select Rendering Provider Changes; the Rendering Providers panel will appear.

- 4. On the Rendering Providers panel, add the rendering provider to the group service location using the current process enter the effective date of the linkage and the rendering provider's National Provider Identifier (NPI) or Provider ID and check the I agree box to accept the provider agreement/attestation obligations. Click Add to populate the table with the new rendering provider's information.
- A "+" will display in the first column next to the new rendering provider's name. See <u>Figure 3</u> – Rendering Provider 3 is the new rendering linkage being added in this example.
- To add that same rendering provider to another service location for the group, click the "+" button next to the newly added rendering provider's name and the Additional Group Locations panel will appear. See Figure 4.
- Complete the fields in the Additional Group Locations panel with the Provider ID, NPI, taxonomy, and 9-digit ZIP Code for the additional group location to which the rendering provider should be linked and click Add. The panel will populate, showing the group service location linkage entered. See Figure 4.



- 8. Repeat steps 5 and 6 for each additional group service location to which that rendering provider should be linked.
- Repeat steps 4, 5, and 6 if additional new rendering linkages need to be added to the group's service locations. (Note: The user can repeat these steps for additional rendering linkages only if the user has not yet selected the Submit option.)
- 10. After all rendering linkages have been entered, select Submit; the Attachments page will appear.
- 11. Complete the required *IHCP Rendering Provider Agreement and Attestation* form for each rendering provider. A single agreement and attestation form can be used to support the linkages of an individual rendering provider to all group service locations operating under a single group Tax ID. The form may be uploaded to the *Attachments* page or submitted via U.S. Mail. (Note: Up to 10 forms may be uploaded; any additional forms must be sent by U.S. Mail with the cover sheet provided at the end of the linkage process. Another option is to add service location linkages for no more than 10 rendering providers in a single transaction.)
- 12. After all required attachments are addressed, select **Submit** to process the transaction. **Note**: The transaction creates only one automated tracking number (ATN), regardless of how many rendering provider linkages were requested.

continued

Figure 3 – Updated Rendering Providers panel on the Poi	tal
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if you are adding new rendering providers, you will be required to supply a Rendering Agreement and Attestation Form for each. You are allowed to i to 10 Rendering Agreement and Attestation Forms. Any additional forms must be sent by mail along with the ATN coversheet presented at the end o process. ** Indicates a required field. *Rendering Linkage Effective Date 9 **Either a Provider ID or NPI is required. Only currently enrolled rendering providers can be added to this group provider *I accept I attest that a signed Rendering Provider Agreement and Attestation Form will be sent by mail along with the coversheet furnished at the end of this application submission. Please use the link below to obtain a copy of the most current Rendering provider Agreement and Attestation Form. Attest form. Born. Attach one Agreement per Group Tax ID for each rendering provider Agreement and Attestation Form Add Reset Only the newly added rendering provider can be expanded to add the additional groups. click the Remove link to remove the row. tick the Remove link to remove the row. tif Provider ID Name Rendering Effective Date tiffective Date Effective Date tift Provider ID Name Rendering Provider 1 09/01/2007 Remove	inde	ing ronders					
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Figure 4 – New panel linking a rendering provider to additional group service locations

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IHCP to hold dental listening sessions at locations around the state in June

The Indiana Health Coverage Programs (IHCP) invites dental providers to participate in one of four <u>Dental Listening Ses</u>sions scheduled at locations around the state during the month of June. The listening sessions are structured as open forums specifically for the dental provider community. The dates, times, and locations for the sessions are provided in Table 1.

The listening sessions are an opportunity for dental providers to meet with a panel of representatives from the Family and Social Services Administration (FSSA), DXC Technology, and the dental benefit managers (DBMs) from the managed care entities (MCEs) to provide feedback and ask questions; there will be no formal presentation. Although claim-related and other questions are welcomed, the IHCP requests that providers take care not to discuss member-specific information during the open forum due to *Health Insurance Portability and Accountability Act* (HIPAA) concerns.

Date	Location	Address
June 7, 2018	Lutheran Hospital	7950 W. Jefferson Boulevard
10 a.m. – noon (EDT)	Kachmann Auditorium	Fort Wayne, Indiana
June 13, 2018 10 a.m. – noon (EDT)	Indiana University Health Methodist Hospital Petticrew Auditorium	1701 N. Senate Boulevard Indianapolis, Indiana (Parking is \$5)
June 26, 2018	Deaconess Hospital	600 Mary Street
10 a.m. – noon (CDT)	Bernard Schnacke Auditorium	Evansville, Indiana
June 27, 2018	St. Catherine Hospital	4321 Fir Street
10 a.m.– noon (CDT)	Birthing Center Conference Room	East Chicago, Indiana

Table 1 – Dates, times, and locations for IHCP Dental Listening Sessions

Workshop Registration

Providers may register for the listening sessions online by visiting the <u>Workshop Registration</u> page at indianamedicaid.com. The registration page provides instructions, including the Workshop Registration Tool Quick Reference. Registration is a two-step process. During registration, you must first register for the location. After you have confirmed your registration, you must then register for the specific session. Registration is strongly encouraged, but walk-ins will be allowed if space is available.



Sign up now for Summer 2018 IHCP provider workshops

The Indiana Health Coverage Programs (IHCP) invites providers to attend free educational workshops throughout the state of Indiana. Provider relations representatives from Anthem, CareSource, MDwise, Managed Health Services (MHS), and DXC Technology (DXC) will offer presentations. Sessions will also be offered on the FSSA EnCred project, the new Non-Emergency Medical Transportation (NEMT) broker, and the program integrity functions within the Indiana Family and Social Services Administration (FSSA).

All workshops will begin at 9 a.m. and conclude at 3:45 p.m. Each workshop will feature the following sessions at the times indicated:

Session Descriptions

■ DXC Technology – Submitting Secondary CMS-1500 Claims and IHCP Updates (9 a.m. – 10:15 a.m.)

This session details the process for billing secondary claims on the Provider Healthcare Portal for users that bill on the Professional claim form. Additionally, the session will include recent IHCP program updates.

■ Conduent – FSSA EnCred Project (10:15 a.m. – 10:45 a.m.)

Conduent will provide an overview and update of the centralized provider enrollment and credentialing project, which includes a summary of the overall scope, the current status, and implementation timeline for the project.

Southeastrans – Broker for Indiana Fee-for-Service Medicaid Non-Emergency Medical Transportation 2018 (11 a.m. – 11:30 a.m.)

Southeastrans will administer the State's Non-Emergency Medical Transportation (NEMT) program for members receiving services through the fee-for-service (FFS) delivery system. This workshop covers how this change affects members, facilities, and the transportation provider community. It explains:

- How members and healthcare facilities can schedule advance appointments, urgent trips, and hospital discharges
- What to expect before, during, and after transportation services are rendered
- Transportation provider requirements for joining the NEMT network
- Provider tools, technology, and training
- FSSA Program Integrity (11:30 a.m. noon)

This session will provide Program Integrity (PI) updates and briefly describe the importance of PI functions, including:

- Who audits Indiana Medicaid providers
- Voluntary disclosures
- PI education/training
- Anthem Anthem Blue Cross and Blue Shield Summer Updates (1 p.m. 1:30 p.m.)

The Anthem update session covers the following topics:

- Access to care standards
- Anthem's new transportation vendor

continued

- How to enroll as a provider in Anthem's opioid treatment program
- Changes to the Healthy Indiana Plan (HIP) program for 2018 and how the changes will affect chiropractic and maternity benefits for HIP members
- Retroactive eligibility for members
- A high-level overview of claim projects and the top claim denials for institutional and professional claims
- MHS MHS Refresher (1:30 p.m. 2 p.m.)

This session provides MHS updates, as well as important information about the following topics:

- Therapy guidelines
- Behavioral health
- Durable medical equipment (DME)
- Enrollment updates
- Claim submission and resolving claim disputes
- Envolve Dental
- MDwise Summer Updates (2:15 p.m. 2:45 p.m.)

MDwise provider relations representatives will review the following topics:

- MDwise delivery systems
- Member retroactive eligibility processes
- Provider eligibility for chiropractic and physical therapy services
- Behavioral health rehabilitative services
- CareSource CareSource Website and Updates (2:45 p.m. 3:15 p.m.)

Join your CareSource Provider Engagement specialist to learn how to navigate through the CareSource website. CareSource will also review claim and benefit updates.

■ MCE and DXC Roundtable (3:15 p.m. - 3:45 p.m.)

This session is an open forum where providers can ask questions and discuss issues with representatives from the managed care entities (MCEs) and DXC. **Note**: Please keep in mind, workshops are NOT intended to resolve specific claim questions. Please address specific claim questions with your Provider Relations field consultant from the appropriate entity outside the of workshop session.



continued

Workshop Registration

To register, visit the <u>Workshop Registration</u> page at indianamedicaid.com. The registration page provides instructions, including the Workshop Registration Tool Quick Reference. If you register online, you will receive immediate confirmation. Be sure to register early, as workshops fill up quickly. If for some reason you are unable to register or do not receive a confirmation, please feel free to attend, regardless. Registration is strongly encouraged, but walk-ins will be allowed if space is available. When registering to attend a workshop, providers must first register for the workshop date/location (see Table 2) and then for each session they would like to attend.

Presentations will be posted on the <u>Summer 2018 IHCP Provider Workshops</u> page at indianamedicaid.com. If desired, providers should print copies of the presentations for reference; paper copies of the presentations will not be provided at the workshops.

Date	Location	Address
June 13, 2018	St. Joseph Regional Hospital Lower Level Conference Room	5215 Holy Cross Parkway Mishawaka, Indiana
June 14, 2018	St. Catherine Hospital Birthing Center Training Room	4321 Fir Street East Chicago, Indiana
June 19, 2018	Indiana University Health Methodist Hospital Petticrew Auditorium	1701 N. Senate Boulevard Indianapolis, Indiana (Parking is \$5)
June 20, 2018	Deaconess Hospital Bernard Schnacke Auditorium	600 Mary Street Evansville, Indiana
June 28, 2018	Reid Hospital* Lingle Hall	100 Reid Parkway Richmond, Indiana
July 12, 2018	Lutheran Hospital Kachmann Auditorium	7950 W. Jefferson Boulevard Fort Wayne, Indiana
July 17, 2018	Dearborn County Hospital Dearborn/Ohio Room	600 Wilson Creek Road Lawrenceburg, Indiana
July 18, 2018	Wabash Valley Alliance Medical Center Fourth Floor	415 N. 26th Street Lafayette, Indiana
July 24, 2018	Indiana University Health Methodist Hospital Petticrew Auditorium	1701 N. Senate Boulevard Indianapolis, Indiana (Parking is \$5)
July 26, 2018	Baptist Health Paris Health Education Center	1850 State Street New Albany, Indiana
July 31, 2018	Indiana University Health Bloomington Hospital Wegmiller Auditorium	601 W. 2nd Street Bloomington, Indiana

Table 2 – Dates and locations for IHCP Sumr	mer 2018 Provider Workshops
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* IHCP Banner Page BR201818 listed the room at Reid Hospital as Lingle Auditorium. The correct room is Lingle Hall.

IHCP banner page

MAY 22, 2018

QUESTIONS?

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